

A5000001597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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AUG 19 2016

R. WHITE

FILED
16 AUG 19 PM 3:05
TALMADGE COUNTY
CLERK



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 9, 2016.

MICHAEL DANFORD
500 PULLMAN RD UNIT A
EDGEWATER, FL 32132

SUBJECT: BEAGLE ONE, INC.
Ref. Number: F15000001597

We have received your document for BEAGLE ONE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

You cannot file a change of registered agent form for a corporation referencing a fictitious name. You will need to remove the d/b/a reference in section 1 before the change of registered agent form can be filed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 116A00016757

156 AUG 19 PM 2:40
TELOS
JDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of INDIANA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: BEAGLE ONE, INC.
2. The principal office address: 203 W. HARCOURT RD
ANGOLA, IN 46703
3. The mailing address (if different): 500 PULLMAN RD UNIT A
EDGEWATER, FL 32132
4. Date of incorporation/qualification: 10/02/2006 Document number: F1000001597
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

MIKE DANFORD
2220 HIBISCUS DR
EDGEWATER, FL 32141

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

MICHAEL DANFORD
500 PULLMAN RD. UNIT A
P.O. Box NOT acceptable
EDGEWATER, FL 32132

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Thomas L. Armstrong President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

07/07/2014
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

FILED
16 AUG 19 PM 3:05
TALLAHASSEE, FLORIDA
SECRETARY OF STATE